

ADULT EDUCATION – FY 1999-2000 CLOSE-OUT ENROLLMENT REPORT

COUNTY & VENDOR/DISTRICT CODES (See Letter of Encumbrance for these codes)

FY	County Code	Vendor Code	Suffix
99			

AGENCY NAME (School District/Community College/Private Agency)				
Table 1 TOTAL ENROLLMENT DATA (July 1, 1999 through June 30, 2000) BY INSTRUCTIONAL PROGRAM				
	ADULT BASIC EDUCATION (ABE) (A)	ENGLISH AS A SECOND LANGUAGE (ESL) (B)	ESL-CITIZENSHIP (C)	ADULT SECONDARY EDUCATION (D)
NUMBER OF TEACHERS (UNDUPLICATED)				
NUMBER OF INSTRUCTION HOURS				
NUMBER OF ENROLLEES (UNDUPLICATED)				
NUMBER AT ATTENDANCE HOURS				
NUMBER OF STUDENTS EARNING ONE OR MORE BENCHMARKS –Benchmarks generated must match the number of Benchmarks reported as earned on the Close-Out Report				

Deadline for Submission: August 15, 2000

INSTRUCTIONS FOR COMPLETING (FORM CDE 101-E2)

All 225/231 providers must complete the Close-Out Enrollment Report for FY 1999-2000. All Close-Out Enrollment Reports must be received in the Adult Education Office by **August 15, 2000** in order to receive payments. The following provides instruction to complete the Close-Out Enrollment Report. For additional assistance call your regional consultant in the Adult Education Office at 916-322-2175.

COUNTY & DISTRICT/VENDOR CODES and AGENCY NAME

Complete the information in the box provided.

TABLE 1. TOTAL ENROLLMENT DATA (July 1, 1999 through June 30, 2000)

Number of Teachers (Unduplicated): Enter number of teachers for the entire fiscal year (July 1, 1999-June 30, 2000) who taught ABE, ESL, ESL-Citizenship, and Adult Secondary Education/GED preparation. Every class has an instructor. If the same instructor teaches two classes of two different groups of students, the instructor is counted only once.

Number of Instructional Hours: Report total number of hours of instruction, teaching, or tutoring.

Number of Enrollees (Unduplicated): Report only enrollees who received at least 12 hours of ABE, ESL, ESL-Citizenship or ASE instruction.

Number of Attendance Hours: Report total number of hours of actual seat time per student.

Number of Benchmarks earned: Report the total number of Benchmarks earned.

Tables 1 & 2 – Although some of the information requested in these tables may have already been reported, please make every effort to complete these three tables. The information requested is vital in that it is part of a report to the U.S. Department of Education.

Print Authorized Person Completing Report: _____ Phone: _____

Signature: _____ Date: _____

Deadline for Submission: August 15, 2000

TABLE 2. Report the number of participants and the number of classes by time and location.

LOCATION OF CLASS (A)	NUMBER OF PARTICIPANTS (B)	NUMBER OF DAYTIME CLASSES (C)	NUMBER OF EVENING CLASSES (D)	SITES OPERATING FULL-TIME PROGRAMS (25 hours or more unduplicated count) (E)
SCHOOL BUILDING:				
Elementary/Secondary school district				
Community college district (junior college, technical institute, etc)				
Four-year college				
OTHER LOCATIONS:				
Learning center				
Correctional institution				
State/local institution for the disabled				
Work site				
Library				
Community-based organization center				
Home or home-based				
Other				
TOTAL:				

TABLE 3. Enter an unduplicated count of personnel by function and job status.

Function Organizational Placement and Type of Job Performed (A)	ADULT EDUCATION PERSONNEL		
	Paid Personnel		Unpaid Volunteers
	Total number of part-time Personnel (B)	Total number of full-time Personnel (C)	(D)
1. Local-level administrative/supervisory/ancillary services			
2. Local teachers			
3. Local counselors			
4. Local paraprofessionals			

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